

HealthLink

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Michigan Automated Prescription Program Update

The Michigan Automated Prescription Program (MAPS) became operational January 1, 2003. Administrative Rules pertaining to MAPS were filed with the Michigan Secretary of State on December 30, 2002 with an effective date of January 7, 2003. Go to www.michigan.gov/healthlicense for related information.

As a reminder, the Official Prescription Form is no longer required for Schedule II controlled substances. Pharmacists are reminded to use their professional judgment regarding the filling of controlled substance prescriptions. If you believe a prescription is legitimate, don't use the lack of an identifier as a reason not to dispense a controlled substance prescription. A pharmacist, under Rule 338.3162(2), has the authority to request identification from the person to whom the controlled substance is delivered.

Also, physicians may continue to utilize Official Prescription Forms until their supply is exhausted.

A hard copy version of the December Health Alert has been mailed to all

licensees involved in the prescribing and dispensing of controlled substances. Questions regarding the electronic reporting of dispensed controlled substances may be directed to mapsinfo@michigan.gov or the Health Regulatory Division at (517) 373-1737.

For dispensers of controlled substances, the following pharmacy software vendors have been contacted regarding the MAPS program: PS 1, Mid-Michigan Computer Services, JasCorp, Compusolve, Transaction Data, SRS, QS1, TechRx, RX30, HBS, Renlar, Daytec, Cerner Corp., DAA Enterprises, MBI, Definitive Home Care Solutions, and Condor (Tech Rx).

MAPS reporting of controlled substances dispensed is required by the 15th of the month following the month the controlled substances are dispensed.

Questions about reporting should be directed to your corporate office, software vendor or GC Services, the contractor for the State of Michigan, at (517) 887-7600.



■ Nursing Workforce Study and Michigan Center for Nursing

Public Act 256 of 2000 charged the Department of Consumer & Industry Services (CIS) with conducting "...a study of the current and future needs of the professional nursing workforce in this state." The Steering Committee, charged with preparing a work statement for the study, included staff from CIS and the Michigan Department of Community Health, as well as representatives from the Michigan Board of Nursing, Michigan Nurses Association, Michigan Organization of Nurse Executives, Michigan Health & Hospital Association, Michigan Licensed Practical Nurses Association, Michigan Association of Colleges of Nursing, ADN Educators Group, Michigan League of Nursing, Colleagues in Caring Project, and Michigan Health Council.

The Department then contracted with Public Sector Consultants to review and analyze data provided by CIS on Michigan's nursing supply, conduct focus group discussions and survey Michigan hospitals and health care systems regarding the supply of and demand for nursing staff.

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The final Nursing Workforce Study report is available for review at www.michigan.gov/healthlicense under Health Services Publications.

Based on recommendations contained in the report, a Request for Proposal process was initiated and in November 2002, a \$300,000 grant was awarded to the Michigan Health Council to establish and operate the Michigan Center for Nursing. The role of the Center is to facilitate activities designed to ensure that an adequate and ongoing nursing workforce is available to meet the health care needs of Michigan's citizens.

The Michigan Health Council has taken preliminary steps since being awarded the grant including the development of a survey to be sent to all licensed registered and practical nurses, establishing a board comprised of interested stakeholders, etc. Watch for updates regarding the Michigan Center for Nursing in future issues of HealthLink.

■ Reporting Requirements

Health professionals who are licensed and registered under the Michigan Public Health Code must comply with a variety of reporting requirements that address issues affecting their professions, as well as the patients they serve.

Article 15 of the Code, which provides for the licensure and registration of health professionals, requires licensees and registrants to report the following information to the Department of Consumer and Industry Services (CIS), Bureau of Health Services:

- A licensee or registrant must notify CIS of a criminal conviction or a disciplinary licensing or registration action that another state has taken against him or her within 30 days of the conviction or action. This includes a disciplinary action that is stayed pending appeal (MCL 333.16222(3)).

A copy of this statute may be downloaded from the Michigan Legislature website at www.michiganlegislature.org.

■ iCON: Individual Career Opportunities in Nursing

The Department of Consumer & Industry Services is pleased to announce that the Michigan Health Council, in partnership with other organizations, has implemented two non-profit interactive systems: iCON and HOTT. These interactive systems have been developed to serve the infrastructure of health care employers, nurses, academic nursing programs, and secondary education health career programs and students.

iCON – *Individual Career Opportunities in Nursing* – can be found at www.nurseicon.org. It is designed to connect nurses with job opportunities that match their job preferences including type of nursing, specialty, geographic location, schedule, or shift. Individuals can post a resume and complete a profile identifying their job preferences. This information will remain confidential until personally released. Individuals also can look for job opportunities that match their preferences. Upon locating a position, persons can instantly forward their registration information and resume, or e-mail the employer to indicate interest or request additional information. Nurses registered on iCON will receive automatic notification of new position postings that match their preferences. If an individual makes his or her registration and job preferences “public”, iCON automatically forwards these profiles to all prospective employers with vacant positions that match. Individuals may also keep their profile private, only forwarding information to employers with positions in which they are specifically interested.

iCON is funded by health care providers who are able to highlight unique aspects of their facility and posted positions. Currently, the system is limited to hospitals, but additional facility types will be added in the future. The iCON model also can be expanded to accommodate

other allied health occupations as resources allow.

Nursing programs are a key factor in marketing iCON. Nursing programs may post faculty positions if they actively market the iCON system to their students. Programs are asked to display the iCON logo on their websites and to encourage students to use the system for career planning.

HOTT—*Health Opportunities for Today and Tomorrow*—can be found at www.mihott.com. It provides middle and high school students with information about 32 different health occupation

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categories and over 150 career specialties. There is a direct interactive pathway to health career programs at state colleges and universities. The marketing of HOTT will be focused on both public and non-public high school math and science teachers, middle and high school counselors, Health Occupation Student Association chapters and students. Students can access career information and communicate with contact persons at the college or university programs of choice. They also can find community resources that provide opportunities for student experiences such as career expos, health fairs and job shadowing. HOTT will be the pipeline for supplying the health care professionals of the future.

iCON and HOTT together are the communication linkages for the CareerLink network. Advisory committees to both systems make decisions about use of data, marketing campaigns, and necessary system revisions and additions. The non-profit nature of the system allows Michigan to reinvest resources in the health care workforce of the future. Visit www.nurseicon.org and www.mihott.com.

■ Supervision Requirements for Psychologists and Limited License Psychologists

Supervision of work activities is an essential component of the State's licensing requirements for psychologists and limited license psychologists. The Board of Psychology is concerned that some psychologists who provide supervision are uncertain about their supervisory responsibilities. For supervisory activities to provide an educational experience, it is recommended that supervisors have expertise in the areas of psychological practice that they are supervising. The following is an overview of supervisory requirements, as prescribed in the Public Health Code and the Administrative Rules.

Section 16109 of the Code, defines "supervision" as a licensed health professional overseeing of or participating in the work of another individual in circumstances where at least all of the following conditions exist:

- The continuous availability of direct communication in person or by radio, telephone, or telecommunication between the supervised individual and a licensed health professional.

- The availability of a licensed health professional on a regularly scheduled basis to review the practice of the supervised individual, to provide consultation to the supervised individual, to review records, and to further educate the supervised individual in the performance of the individual's functions.

- The provision by the licensed supervising health professional of predetermined procedures.

Licensed psychologists: Under section 18223(1) of the Code, an individual granted a psychologist license must have at least two years of postdoctoral experience in the practice of psychology. Section 18212 specifies that a person cannot engage in postdoctoral training without obtaining a full or limited license to practice, and requires an individual who has a limited license to be supervised by a licensed psychologist. The practice and training must be confined to a hospital, clinic, institution, or other arrangement approved by the Board for the training. Administrative Rule 338.2510(2) also requires that the supervision for postdoctoral training be on a regular weekly, face-to-face basis, and include a review of an individual's work functions

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WHAT'S NEW

New Website Page for the Bureau of Health Services

We are pleased to announce a new website page for the Bureau of Health Services. We encourage you to visit www.michigan.gov/healthlicense often for information regarding your professional license as well as "breaking news." We hope this new and improved website will provide our customers with the most convenient way possible to obtain the information they need. A few of the items you will find on our website include frequently asked questions, information regarding continuing education,

and current licensing laws and rules.

In the very near future, we will have all of our licensure applications available on-line so they can easily be downloaded. In addition, we are working on an enhancement that will allow applicants to check on the status of their application on-line.

Please watch for updates regarding our website in future issues of HealthLink

and visit www.michigan.gov/healthlicense soon!



Bureau of Health Services

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and records. In cases of extreme hardship, the Board may approve an alternative supervisory arrangement before the arrangement is implemented.

Limited licensed psychologists:

Section 18223(2) of the Code requires an applicant for a limited license to have a master's degree in psychology and have training and experience appropriate to the practice of psychology. In addition, an applicant must have acquired one year of supervised postgraduate experience in an organized health care setting or other arrangement, as established by the Board. The Code requires an individual to be supervised by a psychologist who has a license other than a limited license. If such a psychologist is not available, an applicant may be supervised by a psychologist who has at least a master's degree in psychology and at least three years of experience in the practice of psychology, or by any other individual approved by the Board. R 338.2507 requires an applicant to have participated in a practicum that was supervised by a licensed psychologist. The rule also requires an applicant to have one year of post-master's experience in the practice of psychology that is supervised by a licensed psychologist. Once a limited license is issued, the Code requires a licensee to be supervised by a licensed psychologist. Consult the Code and rules for more details on the requirements.

A LOOK INTO THE

Trauma Care Commission

Public Act 440 of 2000 created the Statewide Trauma Care Commission in the Department of Consumer & Industry Services (CIS). The 17 members of the Commission served two-year terms. The members represented health professionals, hospitals, health care purchasers or payers, ambulance service providers, the Emergency Medical Services Coordination Committee, and the Department of Community Health.



The Commission was mandated to assess and gather public opinion about the status of trauma care in Michigan. Between October 22, 2001 and January 16, 2002, the Commission held nine public hearings in Detroit, Lansing, Grand Rapids, Flint, Kalamazoo, Bay City, Gaylord, Sault Ste. Marie, and Marquette. In addition, the Commission obtained information on trauma care in other states.

The Commission filed its report in July 2002. The Commission was charged to make recommendations regarding:

- The statewide trauma care delivery system, including the operational and administrative structure.
- Fiscally responsible model policies for a statewide trauma care system, including the classification of trauma care facilities and services, coordinated communications, and rapid transport.
- The unique needs and constraints of rural Michigan.
- The unique needs and constraints of communities located near state borders.

The Commission's final report is available for review at www.michigan.gov/healthlicense.